

State of Minnesota

District Court

County

Judicial District:	
Court File Number:	
Case Type:	Housing

Plaintiff/Petitioner

and

Affidavit of Personal Service

Defendant/Respondent

STATE OF MINNESOTA)
) SS
COUNTY OF _____)
(County where Affidavit signed)

I, _____, state that I am at least 18 years of
(Name of person who hand-delivered documents)

age having been born on _____, and that on _____

I served the attached Summons and Complaint upon the named defendant(s) _____

Name of defendant(s)

by handing a true and correct copy of the documents to him/her at _____
(street address, city, state)

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

E-mail address: _____